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TO: USPTO

FACSIMILE No.: (571) 273-8300

FROM: GARY P. OAKESON

TRANSMITTED BY: BRENDA WISEMAN

OUR DOCKET No.: 01845-22396

FOR: A METHOD FOR REVERSING ALZHEIMER DEMENTIA

SUBJECT: NOTICE OF APPEAL

Commissioner For Patents
PO Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

Attached please find a Notice of Appeal for Docket No. 01845-22396, Application No. 10/750,376.

Thank you. We await your confirmation of receipt.

Respectfully submitted,

Gary P. Oakeson
THORPE NORTH & WESTERN, LLP
Customer No. 20,551
Reg. No. 44266

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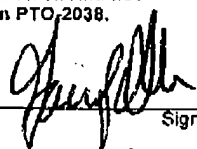
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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 01845-22306	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.6(a)] on 02/05/2008		In re Application of Keith A. Rindlosbach	
Signature <u>Brenda Wiseman</u>		Application Number 10/750,376	Filed 12/31/2003
Typed or printed name Brenda Wiseman		For A Method for Reversing Alzheimer Dementia	
		Art Unit 1616	Examiner Frank I. Choi
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.			
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ _____	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$ 5.00	
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
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WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
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<input type="checkbox"/> applicant/inventor.		Signature	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		Gary P. Oakeson Typed or printed name	
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>44266</u>		801-566-6633 Telephone number	
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34, _____		02/05/2008 Date	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> *Total of <u>1</u> forms are submitted.			

This collection of information is required by 37 CFR 41.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11, 1.14 and 41.6. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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